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May 18, 2018

## VIA EMAIL AND U.S. MAIL

ben.steffen@maryland.gov

Ben Steffen, Executive Director Maryland Health Care Commission 4160 Patterson Avenue Baltimore, MD 21215-2299

Re: Western Maryland Health Regional Medical Center –

Notice of Partial Hospital Closure

Dear Mr. Steffen:

On behalf of Western Maryland Regional Medical Center ("WMRMC") in Cumberland, Maryland and in accordance with MD. CODE, HEALTH-GENERAL § 19-120(l) and COMAR 10.24.01.03B(2), this letter serves as WMRMC's notice of intent close its inpatient pediatric unit, which consists of a single licensed bed. WMRMC understands that closing the one licensed pediatric bed constitutes a "partial closing" and anticipates the partial closing to take effect on August 1, 2018. Simultaneous with the partial closing, WMRMC will open a five (5) bed Pediatric Observation Unit that is described in greater detail below.

WMRMC opened in November 2009, and presently consists of 200 licensed acute care beds. Modifying pediatric care at WMRMC from an inpatient unit to the Pediatric Observation Unit is an appropriate response to the decline of pediatric admissions at WMRMC in recent years. In fiscal year 2017, there were approximately 12,000 admissions to WMRMC, but only 86 of those admissions were pediatric patients, with approximately 60% of pediatric admissions being discharged within 48 hours. The decrease of pediatric admissions at WMRMC is consistent with both National and State trends with respect to such admissions. The largest contributing factor to this trend is the continued growth of pediatric specialty hospitals, which are specifically equipped to handle pediatric patients and their specialty needs. Further, pediatric patients are able to obtain more complex treatment modalities in their pediatric providers' offices as well as at urgent care centers, which further reduces the need for pediatric inpatient beds. Given the extremely modest numbers of pediatric admissions at WMRMC, WMRMC has difficulty attracting nursing staff to serve in the pediatric unit. Additionally, for those of the nursing staff who want to work in the pediatric inpatient unit, the small number of admissions makes it difficult for staff to maintain their competencies.

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In order to meet the needs of WMRMC's pediatric service area population, WMRMC will be opening the Pediatric Observation Unit at WMRMC. Construction on the Pediatric Observation Unit has recently commenced, and its anticipated opening date is July 1, 2018. A Certificate of Need is not required for this construction since the construction costs allocated to the Pediatric Observation Unit are \$516,000.00, a portion of the approximately \$2,600,000.00 total construction costs for modifications to the existing WMRMC Emergency Department, which include the described Pediatric Observation Unit and a secured wing for behavioral health Emergency Department patients. These costs are well below the capital expenditure threshold applicable to acute care hospitals. The Pediatric Observation Unit will be located immediately adjacent to WMRMC's Emergency Department with 24-hour secured access to ensure pediatric patient safety, and will have a full complement of nursing staff qualified to treat the needs of pediatric patients. Further, given its proximity to WMRMC's Emergency Department, pediatric observation patients will have immediate access to emergency physician providers should an emergent/urgent need arise. WMRMC envisions treating the vast majority of its pediatric patients in the Pediatric Observation Unit with patients projected to stay for up to 48 hours. Should a pediatric patient need additional care for his/her condition after approximately 48 hours in observation, WMRMC will work with the patient's family to arrange a transfer to a health care facility that specializes in pediatric care. WMRMC will also use clinical protocols to effect timely transfers those few pediatric patients, who in the treating physician's medical judgment, would benefit from an immediate inpatient admission to a specialty facility without being placed in the Pediatric Observation Unit. Based on 2017 data, WMRMC estimates that approximately three (3) additional pediatric patients per month would be transferred to a pediatric specialty hospital due to WMRMC's proposed transition.

Prior to arriving at this decision, WMRMC communicated with pediatric providers who serve in this community and has obtained their support for WMRMC's plan. The transition of pediatric healthcare services from the pediatric inpatient unit to an observation unit will not result in the displacement of any of WMRMC's existing employees. WMRMC anticipates that pediatric care will be fully transferred to the Pediatric Observation Unit on July 31, 2018. The existing pediatric inpatient unit will be converted to a Medical Surgical General Admission ("MSGA") unit, which is consistent with the other rooms on this floor at WMRMC. To account for the change in use of the pediatric beds on the MSGA floor, WMRMC anticipates converting an equal number of the existing semi-private MSGA rooms into private rooms. This proposed conversion will not result in any increase of the number of licensed beds within WMRMC.<sup>1</sup>

In accordance with COMAR 10.24.01.03(b)(2), WMRMC will publish notice of this transition in the Cumberland Times-News, which is a paper of daily circulation in the affected area. Further, in that notice, WMRMC intends to indicate its plan to hold a public informational hearing on the conversion of the pediatric inpatient unit to an MSGA unit and opening of the Pediatric Observation Unit to assure the community that there will be no interruption in pediatric healthcare services. Before publication of this notice, we would like to consult with Commission staff to ensure

Before first use of the new MSGA beds to be located in the former inpatient pediatric unit, WMRMC will remove headwalls and cap gas lines in the existing MSGA rooms if required by the Commission.

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that it is satisfied with our public information hearing plan. Tentatively, WMRMC is planning an hour-long hearing to be held at WMRMC on June 14, 2018, which will be open to the public. We anticipate having management and pediatric providers present to discuss this evolution of pediatric healthcare in our community.

Jamie Karstetter, Chief Nursing Officer, is overseeing this transition and is the point of contact at WMRMC with respect to this project. He and I would be happy to discuss any and all aspects of this project with you, including but not limited to our plans for the public hearing. We hope to schedule this sooner rather than later, as we have a short window prior to publishing the public notice.

Thank you for your time and attention to this matter, and we look forward to speaking to Commission officials concerning this transition. You can reach me at 301-777-1515, and by email at mgilmore@wmhs.com.

Respectfully submitted,

GEPPERT, McMULLEN PAYE & GETTY

J. MATTHEW GILMORE

JMG/fle

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